



PatientTouch® System Clinical Manager Reports

June 2020

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June 2020

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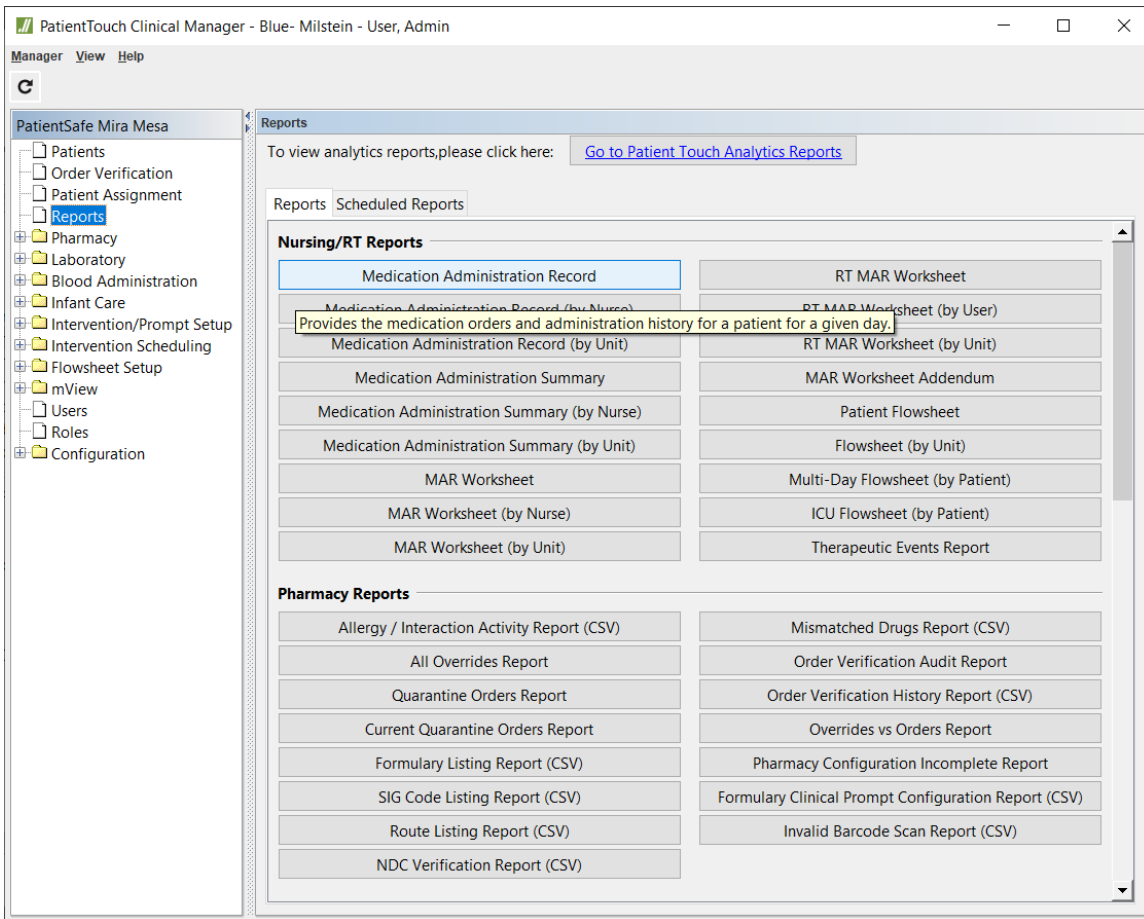
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Viewing Reports

The PatientTouch System generates a variety of operational and statistical reports. Access reports by selecting **Reports** from the menu tree in the Clinical Manager. A link is provided for your reference for PatientTouch Analytics.

To view a brief description of a report, hold your mouse cursor over the name of the report as shown below.



Generating a Report

To generate a report, perform the following steps.

1. Log in to the Clinical Manager and select **Reports**.
2. From the *Reports* screen, select the report you want to run. For example, Medication Administration Record.

Medication Administration Record ✕

Report: Medication Administration Record

Report Parameters

Date:

Patient:

Sort Order:

Printer:

3. Click **Select** to the right of the Date field to select a date or other relative date options from a list at the top of the *Select Date* window.
4. To select the patient (if part of the report), click **Select** to the right of the Patient field.
5. Select Placer Order Number or Generic Name from the **Sort Order** drop-down list to set the order in which the medications are listed (where sort order is available).
6. When you have selected report parameters for all required options (for more information, see Report Parameters), click **View Report** to send the generated report to the screen in a PDF reader or click **Print Report** to send it to the selected printer or to an e-mail address. If you choose to view the report, it usually opens in a PDF reader window. Sometimes, depending on the type of report, the data is displayed in a spreadsheet (example: Microsoft® Excel™).



All system generated reports have a return email address of [no-reply@patientsafesolutions.com](mailto:reply@patientsafesolutions.com).

Report Parameters

For most reports, there are multiple parameters that you must define. These parameters vary, depending upon the type of subject matter of the report. Report Parameters include, but are not limited to the following fields:

- From – Until
- Patient
- User
- Nursing Unit – if the nursing unit has been “inactivated,” the term “inactive” will display next to the nursing unit name. Please note that you can still generate a report with an “inactive” nursing unit.
- Medication
- Printer

Scheduling Reports

For reports run on a routine basis, most hospitals create preconfigured report schedules with predefined parameters so a report can be scheduled to run at regular intervals. Note that not all reports can be scheduled.

You need the Manage Reports privilege in order to create and edit a scheduled report.

The same report can be saved to several different names, specifying different parameters for each version of the report (example: different nursing units). Like other records in the Clinical Manager, you can search for saved reports in the Search field directly above the list of reports.

The screenshot shows the 'Reports' section of the PatientTouch Clinical Manager. The left sidebar contains a tree view with 'Reports' selected. The main area displays a table of scheduled reports. The table has the following data:

Hospital	Name	Report	Schedule	Active
Unknown	BRDFLOOR MAR	Medication Administr...	Monthly, 1st @ 08:00	<input checked="" type="checkbox"/>
PatientSafe Mira Mesa	CCU Mar Worksheet	MAR Worksheet	Monthly, 1st @ 06:00	<input checked="" type="checkbox"/>

Buttons for 'Delete', 'Edit', and 'New' are located at the bottom of the table.

Creating a Scheduled Report

Whether you are scheduling a report to be delivered to a printer or to an e-mail address, the basic steps are the same. When setting up a report, remember to use these guidelines:



Each report has a different set of fields to complete.

1. Select **Reports** and click the **Scheduled Reports** tab.
2. Click **New**.
3. In the Name field, enter a name for the report. This will be the name to use within the Clinical Manager to access this scheduled report.

New Report Schedule: 2 West MAR by Unit

Specify a Name for this Report Schedule

Name: 2 West MAR by Unit

Select a Report To Run

Report: Nursing Unit Statistical Report (CSV)

Select a Printer

Printer: 2W. Printer

Cancel << Previous Next >>

4. Select the type of report from the **Report** drop-down list.
5. Select a printer (or e-mail address) in the Select a Printer area and click **OK**. Each time the report runs, it is sent to the specified destination.



The hospital associated with the selected printer will display on the *Scheduled Reports* screen.



The Printer for MAR Export and MAR Archive Export must be figured as a Network Share.

6. For some reports, you may need to select a Nursing Unit and follow additional screen prompts.
7. **Click Next>>**.
8. Select a Start Date/End Date for the report and click **OK**:



When you select a date, you can choose relative dates so that when you run the report, Today always refers to the current date, Tomorrow refers to the next day, Yesterday refers to the day before, One Week Ago looks back one week and One Month Ago looks back to the previous month. For example: If the parameters below were set for one month ago and if September were selected in the calendar, the report would be run for August.

New Report Schedule: 2 West MAR by Unit

Report Parameters

Start Date: 03/01/2020

End Date: 03/31/2020

Nursing Unit: 2 West

- 9. Select a Nursing Unit for the report and click **OK**.
- 10. Click **Next>>**. The *New Report Schedule* window will display.

New Report Schedule: 2 West MAR by Unit

Schedule

Name: 2 West MAR by Unit Active

Report: Nursing Unit Statistical Report (CSV)

Day Schedule

Monthly - First Day of the Month

Weekly - Select Day(s)

Sun Mon Tue Wed Thu Fri Sat

Time Schedule

Times: 06:00

Use the descriptions below to complete the fields:

Active: By default, the **Active** checkbox is selected. However, to inactivate the report, deselect the **Active** checkbox. This can be used to define a schedule in advance and then make the scheduled report active or inactive, as needed.

Enter a Day/Time Schedule for the report. **Monthly:** Select the Monthly option to schedule the report to run the first day of every month. **Weekly:** Reports can be scheduled weekly – every day or on specific days. To set the schedule, select the Weekly option and then select each day on which you want the report to run.

Time Schedule: Defining the time(s) the report will be run is required. Click **Edit** and enter the time(s) you want the report to run. The format is on a 24-hour clock and there can be multiple times separated by commas. Example: 0700, 1200, etc. Colons are entered automatically by the system so 0700 becomes 07:00. Click **OK**.

When you have finished entering the scheduled time(s), the **Save** button becomes active. Click **Save** to complete the scheduled report.



If the server is down, scheduled reports do not run during the downtime, nor are the ‘missed’ reports run when the server is restored. The scheduled reports begin with next defined scheduled time once the server is restored.

The screenshot shows the 'Reports' section of the PatientTouch Clinical Manager. The 'Scheduled Reports' tab is selected, and a table of reports is displayed. The table has the following data:

Hospital	Name	Report	Schedule	Active
Unknown	2 West MAR by Unit	Nursing Unit Statistic...	Tue @ 06:00	<input checked="" type="checkbox"/>
Unknown	3RDFLOOR MAR	Medication Administr...	Monthly, 1st @ 08:00	<input checked="" type="checkbox"/>
PatientSafe Mira Mesa	CCU Mar Worksheet	MAR Worksheet	Monthly, 1st @ 06:00	<input checked="" type="checkbox"/>

Buttons for 'Delete', 'Edit', and 'New' are visible at the bottom of the table.

Editing a Scheduled Report

To edit a scheduled report, click **Reports** and then click the **Scheduled Reports** tab. Locate the target report from the list and click **Edit** (or double-click the highlighted report) to change the parameters, as needed. The last report configuration screen will display (where the schedule is defined). If changes need to be made to other aspects of the report, click **Previous** to go back to other report parameters.

You can also select a report from the list and click **Delete** to permanently discard the schedule definition.

Sample Scheduled Reports

Pipe-Delimited Scheduled Report

The Pipe-Delimited Scheduled report contains the following information for every medication dose administered during the timeframe indicated:

- Patient MRN
- Patient Visit ID -> Visit Number
- Patient DOB -> format: MM/DD/YYYY
- Order Number -> Placer Order Number
- Ordered Route -> route code or blank if none
- Medication Name -> Generic Name, for multi-component order "Multi-Component Order"
- Formulary Hospital ID -> Formulary PKV(s), comma delimited if multi-component order
- Administration D/T -> format: MM/DD/YYYY HH:MM
- Administered via HH
- Administered via SM

The Pipe-Delimited Scheduled report is a very large report and therefore should not be run ad hoc; it should be scheduled to run during the time of day with the least activity, preferably with only one day's worth of data. It is a pipe-delimited text file, and like all reports, can be placed directly in a file share.

Patient Flowsheet Export (PDF) Report and Multi-Day Flowsheet Export (PDF) Report

These reports are an optional licensed feature. Please contact your account representative for additional information.

These reports can be exported to your EMR and require a specific naming convention. Use the following instructions to name your report in the File Name field of the Report Schedule window:

Naming Convention



The File Name field has a maximum of 150 characters.

The File Name provides 5 optional variables listed in the table below:

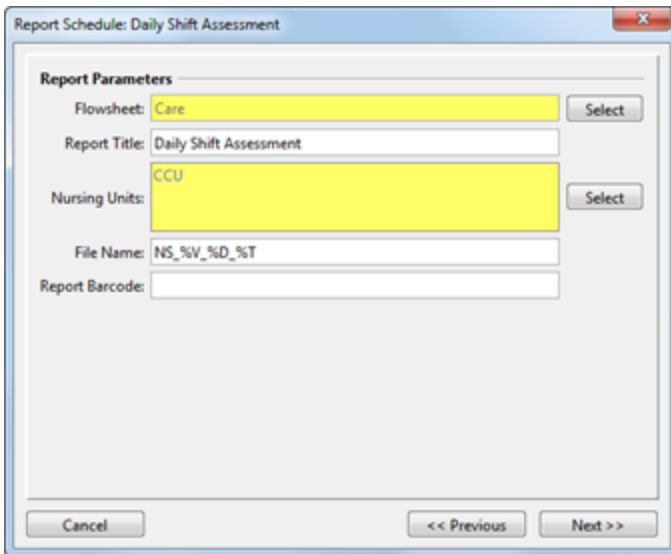
Variable	Description	Example
%H	if it is in file name, server will replace it with Hospital Code -> Configuration -> Settings -> Global Settings tab -> Hospital Code field	NS in the example provided below
%V	if it is in file name, server will replace it with patient visit number of the currently processing visit	a1 in the example provided below

Variable	Description	Example
%D	if it is in file name, server will replace it with selected Flow-sheet name	flow1 in the example provided below
%R	if it is in file name, server will replace it with Report Barcode parameter	not in the example provided below
%T	if it is in the file name, server will replace it with timestamp in the format of "yyyyMMddHHmmss"	20160623093100 in the example provided below

Example

If the file name is: NS_%V_%D_%T, as shown in the screen capture below, the file name will be: NS_a1_flow1_20160623093100.pdf.

You have the flexibility to arrange the order of variables in the file name, and any literal words such as "NS" in this example is acceptable. You can also use spaces and lower case letters in the file name.



The report file name will default to Report.pdf if you do not purchase this licensed feature.

The report is based on the previous 24 hour period starting with the shift start time setting in the Clinical Manager>Configuration>Settings>Global Settings>Shift Start Time; Shift Duration (12 hour or 8 hour shift set).

For example, if you have patient data and schedule the report to run weekly on Tuesdays and Thursdays at 7:00 am (shift start time 07:00/12 hour shift), the report will generate data from Monday 7 am to Tuesday 6:59 am. And then again from Wednesday at 7:00 am through Thursday at 6:59 am.

Patient Flowsheet Export Report - 24 Hours After Discharge

The Patient Flowsheet Export reports can be exported 24 hours *after* discharge (even for long term stay patients). The export should include the entire visit. For example, a single shift assessment export

should cover days 1, 2, 3...until discharge.

If there are any edits to the documentation of an intervention after the 24 hour export report has been generated, a supplemental report automatically generates that includes those specific edits.

Intervention Reports

You may schedule the Patient Flowsheet Export Report to link to an intervention. Select the intervention (Daily Shift Assessment in the example above). Select **Yes** in the Show Intervention Only field to display collected information for the selected intervention only. Select **No** in this field to display information from shared clinical data types in other interventions collected over the last 24 hour period

Module Specific Reports

This section describes the reports available for printing in the PatientTouch Clinical Manager. Some reports may be available for printing via the handheld and some may be available for scheduling. Holding the mouse cursor over the name of a report displays information about the report's details. Each report's parameters determine the information in the report.

Some reports generate a comma-separated (CSV) file that you can import into a spreadsheet for further analysis. From the spreadsheet, you can sort data or copy and paste the report output into other formats. For best results, view and format these reports before printing.

The following Module Specific Reports are included in this user guide:

[Medication Administration](#)

[Specimen Collection](#)

[Blood Products Administration](#)

[Infant Care](#)

[Communications](#)

Medication Administration Reports

Medication Administration reports are described in the next section and are grouped into the following categories

- [Nursing/RT](#)
- [Pharmacy](#)
- [Statistical](#)

Nursing/RT Reports

This section provides descriptions of the following Nursing/RT reports:

Nursing/RT Reports	
Medication Administration Record	RT MAR Worksheet
Medication Administration Record (by Nurse)	RT MAR Worksheet (by User)
Medication Administration Record (by Unit)	RT MAR Worksheet (by Unit)
Medication Administration Summary	MAR Worksheet Addendum
Medication Administration Summary (by Nurse)	Patient Flowsheet
Medication Administration Summary (by Unit)	Flowsheet (by Unit)
MAR Worksheet	Multi-Day Flowsheet (by Patient)
MAR Worksheet (by Nurse)	ICU Flowsheet (by Patient)
MAR Worksheet (by Unit)	Therapeutic Events Report

Medication Administration Record

The Medication Administration Record, or MAR, provides the medication orders and administration history for a patient for a given day. It includes allergies, diagnosis, attending Physicians and order information suitable as the printed, permanent MAR for the patient's chart.

By Nurse and By Unit: The MAR by nurse and MAR by unit reports provide the same information as the standard MAR, but have parameters for Nurse and Unit to view all patients assigned to a specific caregiver or nursing unit.

Medication Administration Summary

This Medication Administration Summary provides up to seven days of medication history for a patient, providing an overview to users who want to see a longer period of the patient's medication history. It shows both active and discontinued medication orders.

While the report does not contain the full detail necessary as a permanent chart document or as a means for auditing medication errors, some hospitals choose to generate this report each day for all patients on the unit and place it in the patient chart as a resource for physicians during their rounds.

By Nurse and By Unit: You can also run the report by nurse, or unit.

MAR Worksheet

The MAR Worksheet displays all currently ordered medications and due times for a patient. PRN medications are listed after the scheduled meds. It can be used to replace the handwritten notes many caregivers write to keep track of their patients and important information about them. Caregivers can reprint this report during a shift to show the latest medication orders.

By Nurse and By Unit: The MAR Worksheet by nurse and by unit reports provide the same information as the standard MAR, but provides MARs for all patients assigned to a specific caregiver or nursing unit.

RT MAR Worksheet

The RT MAR Worksheet displays all currently ordered RT medications and due times for a patient. PRN RT medications are listed after the scheduled medications. It can be used to replace the handwritten

notes many caregivers write to keep track of their patients and important information about them. Caregivers can reprint this report during a shift to show the latest medication orders.

By User and By Unit: The RT MAR Worksheet by user and by unit reports provide the same information as the standard RT MAR worksheet, but provide MARs for all patients assigned to a specific caregiver or nursing unit.

MAR Worksheet Addendum

The MAR Worksheet Addendum provides a blank MAR Worksheet that caregivers can use to track changes and make other working notes they may need during a shift or med pass.

Patient Flowsheet

The Flowsheet can be configured to display clinical data that is collected on a patient. You must select the type of Flowsheet you want to view or print as one of the parameters for a Patient Flowsheet Report.

The report includes the name and credentials of the documenting caregiver plus a user-defined directional barcode to direct the information to a specific area of the EMR.

Clinical data can now be graphed across a Flowsheet row for multi-day Flowsheets. The parameters of the graph are determined by the minimum and maximum values identified in the clinical type chosen to graph. For more information on configuring a Flowsheet row, see *Creating a Flowsheet Row*.

Users may also enter information to be displayed as a barcode on Flowsheets when they are printed or viewed. This barcode is most frequently used by the hospital to scan the report into the hospital EHS system. The user will need to enter the barcode each time the report is printed or viewed. For scheduled reports, the user can define the barcode when the report is scheduled. It will then appear on the report every time it prints.

In order to select a new Flowsheet type for display or printing, the clinical types, Flowsheet rows, and Flowsheet categories must first be defined and configured in Clinical Manager. See **Flowsheet/mView Configuration** in the *Clinical Manager Configuration User Guide* for more information.

Flowsheet by Unit

The Flowsheet by Unit report allows you to print a specific Flowsheet for all patients on the selected nursing unit.

Multi-Day Flowsheet (by Patient)

The Multi-Day Flowsheet report covers multiple days and displays hospital-customized information including the patient's vital signs and other care-related information. The data is grouped by shift time intervals, defined by the user generating the report (e.g. 4, 8 or 12 hours). Seeing the data across multiple days allows the viewer to get a sense of the trending of the patient's condition. This report is available in the Scheduled Reports to be printed by Unit. A hospital-specific barcode can be associated with this report to support scanning the printed report into an EHR.

ICU Flowsheet (by Patient)

The ICU Flowsheet is a 24-hour Flowsheet specifically for critical care units, displaying the patient's vital signs and other hospital-customized care-related information. The data is displayed in hourly increments, with the 24-hour time period being configurable, based on the selected start time (e.g. a start time of 00:00 will display information from 00:00 to 23:59). This report gives the viewer a sense of

the trending of the patient's condition within a 24 hour period. This report is available in the Scheduled Reports to be printed by Unit. A hospital-specific barcode can be associated with this report to support scanning the printed report into an EHR.

Therapeutic Events Report

The Therapeutic Events Report provides caregivers, starting their shifts with documentation, about medications omitted or held during the previous shift, and PRN medications that were given. This report provides history (defined by start and end dates) for a given set of patients.

In addition to start and end dates, select a specific nurse to report on patients assigned to that caregiver. If patients are not yet assigned, the report returns no results. Events can be sorted by Room Number, Order Number or Generic Name. Or, they can be sorted by Patient Name, Order Number or Generic Name.

Pharmacy Reports

This section provides descriptions of the following Pharmacy reports:

Pharmacy Reports	
Allergy / Interaction Activity Report (CSV)	Mismatched Drugs Report (CSV)
All Overrides Report	Order Verification Audit Report
Quarantine Orders Report	Order Verification History Report (CSV)
Current Quarantine Orders Report	Overrides vs Orders Report
Formulary Listing Report (CSV)	Pharmacy Configuration Incomplete Report
SIG Code Listing Report (CSV)	Formulary Clinical Prompt Configuration Report (CSV)
Route Listing Report (CSV)	Invalid Barcode Scan Report (CSV)
NDC Verification Report (CSV)	

Allergy/Interaction Activity Report (CSV)

The Allergy/Interaction Activity Report presents an overview of all Allergy and Drug Interaction warnings received by caregivers at the bedside. The data includes the action taken (warning overridden or administration canceled) and the medication, user, and patient data. The data also includes the following event types for duplicate drug therapy: Duplicate Drug Therapy Warning Override and Duplicate Drug Therapy Canceled.

All Overrides Report

The All Overrides Report provides a CSV listing of all of the overrides that occurred during the selected time frame for the selected unit. The data includes date, type of override, medication, user and patient data. This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Quarantine Orders Report

The Quarantine Orders Report allows hospitals that utilize the Order Verification feature to review all orders that were quarantined for a user-specified time period. The data includes order, patient, user,

and quarantine reason.

Current Quarantine Orders Report

The Current Quarantine Orders Report allows hospitals that utilize the Order Verification feature to review all orders that currently are in quarantined status. The data includes order, patient, user, and quarantine reason.

Formulary Listing Report (CSV)

The Formulary Listing Report provides a complete record of the hospital formulary detail in the Master Drug File. This report also includes a column for Exclude Duplicate Therapy Check. This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application, such as Microsoft Excel.

SIG Code Listing Report (CSV)

The SIG code Listing Report provides a complete record of the system's SIG codes and related settings. This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Route Listing Report (CSV)

The Route Listing Report provides a complete listing of all of the available routes entered into the PatientTouch System. If configured, the assigned Coding System, Code, Description, and Short Description are also provided. This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

NDC Verification Report (CSV)

The NDC Verification Report provides details on any formulary items that do not contain at least one valid First DataBank™ (FDB) NDC number, which makes the formulary item invalid for allergy and drug interaction checking. The NDC Verification Report includes the following fields: Formulary ID, Generic Name, Reference Brand Name, Strength/Unit, Volume/Unit, Dosage Form, and Existing Non-Valid NDCs. Disabling the medication from drug interactions and allergy checking and/or configuring the formulary item as a non-medication from within the Master Drug File will remove the drug line item from this report.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Mismatched Drugs Report (CSV)

This report provides details on any formulary items that have NDC or RxNorm mismatches compared to the currently loaded FDB database.

The Mismatched Drugs Report contains the following fields: Formulary ID, Generic Name, Reference Brand Name, Strength/Unit, Volume/Unit, Dosage Form, Mismatched Drug Codes/Names, and Mismatch Type.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Order Verification Audit Report

The Order Verification Audit Report can be used by caregivers at hospitals that use the Order Verification feature to determine if there are orders that have:

- Never been verified
- Been quarantined and not updated
- Been discontinued and not verified during a given time frame

Order Verification History Report (CSV)

The Order Verification History Report allows hospitals that utilize the Order Verification feature to audit the verification status changes for individual patient orders. Details include order information, order status, user, and reasons for quarantine.

Select the destination where you want to print, export, or e-mail this report and then, select the target patient.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Overrides vs. Orders Report

The Overrides vs. Orders Report provides caregivers with a way to verify that all medications recorded with the PatientTouch System have an associated order in the patient's record. Caregivers encounter situations every day that call for a medication to be administered before the order has been entered in the system. Using this report, the PatientTouch System compares and matches any "Order Not Found in System" medication administrations to orders entered into the system later.

When comparing these orders, the PatientTouch System identifies orders within the specified time frame that have a matching medication name and strength, but not necessarily the dose. If more than one possible match is encountered, each one appears next to the Override Medications Given.

All report parameters are required. You can select a 3, 6, 9, or 12 hour time frame in which to look for comparable orders with a start time within that window (beginning at the administration time and looking forward).

Pharmacy Configuration Incomplete Report

The Pharmacy Configuration Incomplete Report provides details on formulary items, SIG Codes, and allergy codes created through an interface message with the PIS that have not yet been configured in the PatientTouch System.

Formulary Clinical Prompt Configuration Report

This report generates a list of clinical prompts assigned to formulary items along with the prompt settings for that item.

Invalid Barcode Scan Report (CSV)

This report generates a list of barcodes scanned that resulted in no barcode found messages. This is also a scheduled report.

Statistical Reports

This section provides descriptions of the following Statistical reports:

Statistical Reports	
Patient Rights Exception Report	Follow Up Compliance Report
Hospital Statistical Report (CSV)	MAR Export Summary (CSV)
Nursing Unit Statistical Report (CSV)	MAR Archive Export Summary (CSV)
User Statistical Report (CSV)	Undocumented Scheduled Doses Report (CSV)
Nursing Unit Scan Compliance (pdf)	Numerator Report - Measure specific eMAR (CSV)
Dose Not Given Report	Numerator Report - Measure specific Vitals (CSV)
HIPAA Audit Trail Report (by Patient)	eMAR Numerator Report by Parameter (CSV)
HIPAA Audit Trail Report (by User)	eMAR Orders Report by Parameter (CSV)
Medication Administration Activity Detail Report	First Dose Education Report (CSV)
Cancel Admin Report (CSV)	

Patient Rights Exception Report (CSV)

The Patient Rights Exception Report shows all medication administration events where the order parameters were overridden. This report includes event type, override reason, medication, administration, user, and patient data.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Hospital Statistical Report (CSV)

The Hospital Statistical Report provides a statistical overview of commonly audited data points including bedside scanning compliance. The report includes hospital totals as well as individual nursing unit statistics.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Nursing Unit Statistical Report (CSV)

The Nursing Unit Statistical Report presents the same data points as the Hospital Statistical Report but includes both nursing unit totals and individual user statistics per unit. You can include one or all of the nursing units.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

User Statistical Report (CSV)

The User Statistical Report presents the same data points as the Hospital Statistical Report but includes individual user statistics, across all units on which they worked.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Nursing Unit Scan Compliance Report (PDF)

The Nursing Unit Scan Compliance Report generates a list of all nurses who administered medications on the unit during the given timeframe, and the percentage of administrations given using the handheld. This allows the nurse manager of each unit to gain a quick understanding of his/her unit's scan compliance. You can also choose to include or not include "Not Give" administrations using the report parameters. This report can be printed immediately or scheduled according to the needs of the unit. The user can select one or multiple nursing units to include in the report, which will print by unit. This information displays in the report header. In addition, the user can select a Not Given Reason from which to include in the report. This information also displays in the report header.

Dose Not Given Report

The Dose Not Given Report provides a detailed view of all scheduled medication doses that were not administered or were omitted. The report includes the reason for omission as well as detailed order, patient, and user data.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

HIPAA Audit Trail Report

The HIPAA Audit Trail Report provides information on what users in the PatientTouch System have accessed patient information during a specified time period. The Health Insurance Portability and Accountability Act ("HIPAA") defines, among other things, Audit Controls with which hospitals must comply.

This report is available by Patient and by User. It identifies the activity of users not currently assigned to the patient for whose data they are accessing.

For reporting purposes, accessing patient data is defined as one of the following actions:

- Viewing or printing reports that contain patient information (such as MAR or MAR Worksheet)
- Viewing, editing, or printing patient records in the Clinical Manager
- Scanning a patient wristband with the handheld
- Preparing a medication with the handheld
- The HIPAA Audit Trail Report can be run by patient or by user.

Medication Administration Activity Detail Report

The Medication Administration Activity Detail Report provides a summary view of all administration activity for one specific formulary line item for a configurable date range in a CSV format. The report data includes the event type (early, late, and omitted), reason (if applicable), date/time, amount given, order number (if applicable), patient visit number, unit name, and caregiver name and role.

Cancel Admin Report (CSV)

The Cancel Admin Report provides a detailed view of all medication administrations that were started by scanning a medication barcode, and then canceled by the user. The report includes the event type as well as medication scanned, date and time, unit, user, order ID and visit number.

This report is generated in a comma-separated values format (.CSV) that can be viewed in a spreadsheet application such as Microsoft Excel.

Follow Up Compliance Report

The Follow Up Compliance Report provides information on compliance to follow-up prompts such as pain scales and IV stop times. Management can use this type of report to monitor how users are performing in this area, provide additional training to staff as well as determine if adjustments need to be made to follow up configurations to increase compliance.

MAR Export Summary (CSV)

The MAR Export Summary identifies when the last export occurred, how many reports were exported, and how many were re-exported. For each re-exported report, the summary contains the MRN, Visit Number, and MAR Date of the patient.

The MAR Export generates a TIFF or PDF for any MAR that has been modified since the last time it ran. The output is individual TIFFs or PDFs for each day, for each patient. If a MAR has been edited, regardless of the day, it will be re-exported.

MAR Archive Export Summary (CSV)

The MAR Archive Export Summary identifies when the last Archive Export occurred, how many reports were exported, and how many were re-exported.

The MAR Archive Export generates either a TIFF or PDF for a MAR that comprises an entire patient visit. The report kicks off only when the patient is discharged and then the MAR is created as a single TIFF or PDF *for the entire visit*.

Undocumented Scheduled Doses Report

The Undocumented Scheduled Doses report provides information on scheduled medication orders that were not administered, and what override reasons were documented.

Numerator Report – Measure Specific eMAR (CSV)

This Meaningful Use report provides the numerator information to calculate the Electronic Medication Administration Record measure in a CSV format. The report data includes encounter ID, patient ID, last name, first name, DOB, age, gender, number of orders, and number of orders for which all administered doses are given using assistive technology (scanned using the handheld). The PatientTouch System software name and version number also appear on the report. If your hospital is configured for Campus Support, you will have the option of selecting the specific facility for which you want to run this report without logging into the Clinical Manager for the specific hospital.

Numerator Report – Measure Specific Vitals (CSV)

This Meaningful Use report provides the numerator information to calculate the "Record Vital Signs" measure in a CSV format. The report data includes encounter ID, patient ID, last name, first name, DOB, age, gender, All Vitals Recorded for Stage, and whether the height, weight, and/or BP was recorded during the encounter. The PatientTouch System software name and version number also appear on the report. If your hospital is configured for Campus Support, you will have the option of

selecting the specific facility for which you want to run this report without logging into the Clinical Manager for the specific hospital.

eMAR Numerator Report by Parameter (CSV)

This report filters the patient visits included in the numerator by location and Service ID. In addition, if the nurse notes on the handheld that the dose was documented in the EHR (non-PatientSafe Solutions) MAR, this report appropriately considers this in the numerator. The report data includes encounter ID, patient ID, last name, first name, DOB, gender, number of orders and number of orders for which all administered doses are given using assistive technology (scanned using the handheld). The PatientTouch System software name and version number also appear on the report. If your hospital is configured for Campus Support, you will have the option of selecting the specific facility for which you want to run this report without logging into the Clinical Manager for the specific hospital.

eMAR Orders Report by Parameter (CSV)

This report is very similar to the eMAR Numerator Report by Parameter (CSV) in that it includes the additional filtering parameters of excluded nursing unit(s), Service ID(s), and utilize the not give override reasons. However, this report also includes additional information such as the order number, order start/stop time, generic name of the medication, formulary PKVs, total doses administered, doses administered using assistive technology, and doses marked as not give with defined reasons, if selected in the report parameters). The PatientTouch System software name and version number also appear on the report.

If your hospital is configured for Campus Support, you will have the option of selecting the specific facility for which you want to run this report without logging into the Clinical Manager for the specific hospital.

The following filters/inclusions are available in the eMAR Numerator Report by Parameter and eMAR Orders Report by Parameter-:

- Excluded Nursing Unit: If one or more Nursing Units are selected, patient visits with this Nursing Unit as the last Nursing Unit for the patient visit will be excluded from the reports.
- Excluded Service ID: If one or more Service IDs are selected, patient visits with this Service ID as the last Service ID for the patient visit will be excluded from the reports.
- Included Not Give Reason: This may be used by hospitals who do not have bi-directional interfaces to their EHR, and are documenting administrations in the EHR as well as Clinical Manager (or instead of Clinical Manager). This allows the nurse to identify doses as not given via the HH, and “includes” this administration in the doses documented in Clinical Manager. This will result in the associated order being removed from the Numerator.

First Dose Education Report

This report provides a detailed view of all first dose education responses given by the clinician when he/she is prompted to educate the patient about medications. The quality improvement (or other) department user can use this report to identify potential areas for improvement around first dose education and clinician compliance in providing it to patients.

Specimen Collection Reports

You must have the Manage Reports privilege to view and generate Lab reports. The following reports are available for use with the Specimen Collection module and are described in this topic:

[Draw List \(by Unit, User, or Patient\)](#)

[Lab Workflow Report](#)

[Lab Early/Late Report](#)

[Can't Get Draw Reports](#)

[Lab Omitted Report](#)

[Lab Statistical Report](#)

[Lab User Activity Report](#)

[Missing Samples Report](#)

The following single-order draw reports can be automatically printed as notifications on any network printer designated as the Lab Printer in the PatientTouch Clinical Manager if the corresponding options are enabled.

- New Stat and Urgent/ASAP Orders
- Late Orders
- "Can't Get" Orders
- "Re-Collect" Orders

To access reports in the PatientTouch Clinical Manager (except those automatically printed), select the report you want to run from the Reports folder as shown below. You can then select parameters and run the report or view it on the screen.

Lab Reports	
Draw List (by Unit)	Can't Get Draw Report Current (CSV)
Draw List (by User)	Can't Get Draw Report Current (by Unit)
Draw List (by Patient)	Lab Omitted Report
Lab Workflow Report	Lab Statistical Report (CSV)
Lab Early/Late Report	Lab User Activity Report (CSV)
Can't Get Draw Report Historical (CSV)	Missing Samples Report
Can't Get Draw Report By Unit Historical (CSV)	

Draw List (by Unit, User, or Patient)

The Draw List is used by caregivers to generate and review a list of outstanding lab orders for patients in one or more nursing units.

Parameters

The Draw List is available as three separate reports, sorted by nursing unit, by user, or by patient. It is listed by the due time of lab order. Parameters vary based on the selected report.

You can generate the Draw List from the Reports menu or from the Lab Dashboard. You can also select the collector types (Nurse, Phlebotomist, RT, and/or Add-On) to include.

Draw List (by Unit) ✕

Report: Draw List (by Unit)

Report Parameters

Nursing Units:

Collector Type:

Printer:

Example of Draw List (by Unit) Report

Draw List (by Unit)						
Unit: 3RDFLOOR Draw List - (5 Patients)						
111 1 Burns, Frank						
DOB: 09/28/1956		Visit: V100006			MRN: M100006	
Urgent	03/25/2019 @ 09:02	(1) Anearobic	Blood Culture Set 1	P	T03212	Blood Culture Set 1:
Urgent	03/25/2019 @ 09:02	(1) Anearobic	Blood Culture Set 2	P	T03213	Blood Culture Set 2:
Routine		(1) GREEN	Basic Meta Profile	P	ACC:000	Basic Meta Profile:
STAT		(1) LAVENDER	CBC w diff	P	ACC:0126	CBC w diff:
STAT		(1) Blue	CBC	P	ACC:1234	CBC:
Routine		(1) Swab	Wound Culture	P	T0325	Wound Culture:
Routine		(1) Sterile Container	Urine Culture	P	T0326	Urine Culture:
Routine		(1) LAVENDER	CBC w diff	P	T0327	CBC w diff:
1191 1 Genesee, Lili						
DOB: 09/28/1956		Visit: 0119001			MRN: 20200119001	
Routine		(1) GOLD	TPXmatch	P	T0219:001	TPXmatch:
Routine		(1) Blue	CBC	P	T0228:001	CBC:
120 1 Smith, Frank						
DOB: 09/28/1956		Visit: V1001			MRN: M1001	
Routine		(1) LAVENDER	CBC w Diff	P	ACC:123	CBC w Diff:
Routine		(1) LAVENDER	CBC w Diff	P	T0304	CBC w Diff:
Routine		(1) LAVENDER	CBC	P	T0305	CBC:
122 3 Riley, Emma						
DOB: 09/28/1965		Visit: V11101			MRN: M11101	
Routine		(1) LAVENDER	CBC	P	T0211	CBC:
200 1 Caan, Scott						
DOB: 09/28/1956		Visit: V110099			MRN: M110099	
STAT		(1) Blue	CBC	P	ACC:5005	CBC:

Lab Workflow Report

The Lab Workflow Report documents each action taken on a patient and lists the user who performed the action and the time the action was taken.

Parameters

You can specify a patient and a range of dates and/or times to include in the Lab Workflow Report.

Lab Workflow Report ✕

Report: Lab Workflow Report

Report Parameters

Start Date: 00:00 ▾

End Date: 00:00 ▾

Patient:

Printer:

Example of Lab Workflow Report

Lab Workflow Report (02/01/20 - 03/05/20)	
Unit: 3RDFLOOR - (4 Patients)	
<hr/>	
120 1 - Smith, Frank	
Medical Record Number:	M1001
Visit Number:	V1001
Date of Birth:	09/28/1956
Routine - ACC:123	
Ordered: 02/28/2020 11:48	
Tests: CBC w Diff	
Tubes:	
Type	Status
LAVENDER (BAR:123)	Collected. By Cartwright, Judy at 02/28 11:50. Rejected. Reason: SPECIMEN DAMAGED. By Banks, Bernie at 02/28 11:51
Routine - T0212	
Ordered: 02/11/2020 12:32	
Tests: CBC	
Tubes:	
Type	Status
LAVENDER (TR0212)	Collected. By Bloodsoe, Drew at 02/11 12:34.
Routine - T0222	
Ordered: 02/19/2020 13:05	
Tests: CBC	
Tubes:	
Type	Status
LAVENDER (TR0222)	Collected. By Bloodsoe, Drew at 02/19 13:08.
Routine - T0224	
Ordered: 02/24/2020 08:42	
Tests: CBC w Diff	
Tubes:	
Type	Status
LAVENDER (TR0224)	Collected. By Drawright, Jonathan at 02/24 11:55.
STAT - T0226	
Ordered: 02/24/2020 11:23	
Tests: CBC w Diff	

Lab Early/Late Report

The Lab Early/Late report displays a list of timed and routine draw specimens that were collected early or late, and stat and urgent orders that were collected before the due time.

Parameters

You can specify a range of dates and/or times to include in the Lab Early/Late Report.

Lab Early/Late Report ✕

Report: Lab Early/Late Report

Report Parameters

Start Date: 00:00 ▾

End Date: 00:00 ▾

Printer:

Example of Lab Early/Late Report

Lab Early/Late Report (02/01/20 - 03/05/20)

Unit: 3RDFLOOR - (2 Patients)

120 1 - Smith, Frank
 Medical Record Number: M1001
 Visit Number: V1001
 Date of Birth: 09/28/1956

STAT - T0226
 Ordered: 02/24/2020 11:23
 Tests: CBC w Diff

Tubes:

Type	Status
LAVENDER (TR0226)	Collected. By Cartwright, Judy at 02/28 09:43. Late Reason: CONDITION CHANGE. Rejected. Reason: SPECIMEN DAMAGED. By Banks, Bernie at 02/28 11:25 Collected. By Cartwright, Judy at 03/03 09:55.

122 3 - Riley, Emma
 Medical Record Number: M11101
 Visit Number: V11101
 Date of Birth: 09/28/1965

STAT - T0114
 Ordered: 01/14/2020 09:19
 Tests: CBC

Tubes:

Type	Status
Blue (TR0114)	Collected. By Bloodsue, Drew at 02/14 10:58. Late Reason: CLARIFYING MD ORDER.

Can't Get Draw Reports

The Can't Get Draw Reports are used to identify all current and historical specimens that have been marked as "Can't Get" in the Collection Workflow. These reports will identify specimens that were unable to be collected. The following new reports have been added:

- Can't Get Draw Report Historical (CSV)-displays an Excel spreadsheet with a list of specimens that were marked as "Can't Get" in the Collection Workflow for the dates specified. If the specimen was since collected, the original "Can't Get" information, along with any subsequent attempts, still displays in this report. For example, if a specimen is marked as "Can't Get" at 8:00 a.m. but is since collected at 10:00 a.m. the same day, the original "Can't Get" information and all subsequent attempts will display in this report.
- Can't Get Draw Report By Unit Historical (CSV)- displays an Excel spreadsheet with a list of specimens by nursing unit, that were marked as "Can't Get" in the Collection Workflow for the dates specified. If the specimen was since collected, the original "Can't Get" information, along with any subsequent attempts, still displays in this report. For example, if a specimen is marked as "Can't Get" at 8:00 a.m. but is since collected at 10:00 a.m. the same day, the original "Can't Get" information and all subsequent attempts will display in this report.
- Can't Get Draw Report Current (CSV)- displays an Excel spreadsheet with a list of current specimens that were marked as "Can't Get" in the Collection Workflow for the dates specified. If the specimen was since collected, the entire entry is removed from this report. For example, if a specimen is marked as "Can't Get" at 8:00 a.m. but is since collected at 10:00 a.m. the same day, the "Can't Get" information for this specimen will not display in this report.
- Can't Get Draw Report Current (By Unit)- displays a PDF file with a list of current specimens by nursing unit, that were marked as "Can't Get" in the Collection Workflow for the dates specified. If the specimen was since collected, the entire entry is removed from this report. For example, if a specimen is marked as "Can't Get" at 8:00 a.m. but is since collected at 10:00 a.m. the same day, the original "Can't Get" information for this specimen will not display in this report.

Parameters

The parameters will vary depending on the type of report you select. The screen capture below is from the Can't Get Draw Report Current (CSV).

Example of Can't Get Draw Report Current (CSV)

A	B	C	D	E	F	G	H	I	J	K	L
Collector	Patient	Patient Unit	Patient Location	Order Type	Specimen Tests	Documented Date	Documented Time	Can't Get Reason	Can't Get Comment	Collection Status	Actual Collection
Phil, Phlebotomist	Brown, Charlie	3rd Floor	1000 1	ROUTINE	TPX Match	2/26/2014	12:44	Patient Off Unit	Will try later	UNCOLLECTED, 02/26/2014 12:44	UNCOLLECTED

Lab Omitted Report

The Lab Omitted report includes the lab orders that were omitted using the PatientTouch System Manager.

Parameters

You can specify a range of dates and/or times to include in the Lab Omitted Report.

Lab Omitted Report ✕

Report: Lab Omitted Report

Report Parameters

Start Date: 00:00 ▾

End Date: 00:00 ▾

Printer:

Example Lab Omitted Report

Lab Omitted Report (01/01/20 - 03/05/20)

Unit: 3RDFLOOR - (2 Patients)

1 1 - One, Patient

Medical Record Number: MRN1
 Visit Number: VISIT1
 Date of Birth: 09/28/1956

STAT - test_1
 Ordered: 09/12/2018 10:40
 Tests: Test_1

Tubes:

Type	Status
BLUE (2345)	<i>No Collection Record.</i>

Omitted by: User, Admin
 Omitted at: 01/21 08:31
 Omitted reason: test

STAT - test_2
 Ordered: 09/12/2018 10:42
 Tests: Test_1

Tubes:

Type	Status
BLUE (2345)	<i>No Collection Record.</i>

Omitted by: User, Admin
 Omitted at: 01/21 08:31
 Omitted reason: test

2 1 - Two, Patient

Medical Record Number: MRN2
 Visit Number: VISIT2
 Date of Birth: 09/28/1956

Routine - order_1
 Ordered: 09/26/2017 10:59
 Tests: glucose

Tubes:

Type	Status
BLUE (001)	<i>No Collection Record.</i>

Omitted by: User, Admin
 Omitted at: 01/21 08:31
 Omitted reason: test

Lab Statistical Report

The Lab Statistical report is a tabular report, generated in comma-separated text format (.CSV), which includes the date and time of the draw, collector/user, nursing unit, tests collected, and witness, if any.

Each row in the report displays activity data for one completed/documented specimen collection workflow (draw), whether or not any or all specimens were collected.

Tests for a lab order are displayed only if all ordered tubes for that test were collected. (A row will still be included in the report, since the draw with the “Can't Get” tubes was documented.)

The Order Type column includes the order type(s) — stat, urgent, timed, and/or routine — documented for the draw, whether or not all specimens were collected. For example, if a draw included one timed and one routine order, the value “ROUTINE, TIMED” would be displayed in the column. If a draw included two routine orders, the value “ROUTINE(2)” would be displayed.



If a specimen is not documented as collected (e.g., if the collector printed labels but did not confirm and document the draw), the collection activity is not included, even if the specimen was received in the lab via the LIS.

This report can be opened in Microsoft Excel or other data manipulation tools for analysis and formatting as desired.

Parameters

You can specify the start and end date for the report.

Lab Statistical Report (CSV) ✕

Report: Lab Statistical Report (CSV)

Report Parameters

Start Date:

End Date:

Printer:

Example of Lab Statistical Report

	A	B	C	D	E	F	G	H
1	Date	Time	Unit	User	Role	Tests	Order Type	Witness
2	2/11/2020	12:33	3RDFLOOR	Bloodsoe, Drew	Phlebotomist	CBC	ROUTINE	
3	2/14/2020	10:58	3RDFLOOR	Bloodsoe, Drew	Phlebotomist	CBC	STAT	
4	2/14/2020	11:30	3RDFLOOR	Bloodsoe, Drew	Phlebotomist	CBC w Diff	ROUTINE	
5	2/19/2020	12:17	3RDFLOOR	Bloodsoe, Drew	Phlebotomist	CBC	ROUTINE	
6	2/19/2020	12:55	3RDFLOOR	Cartwright, Judy	Nurse Manager,Staff Nurse	CBC	ROUTINE	
7	2/19/2020	13:08	3RDFLOOR	Bloodsoe, Drew	Phlebotomist	CBC	ROUTINE	
8	2/24/2020	11:53	3RDFLOOR	Drawright, Jonathan	Phlebotomist	CBC w Diff	ROUTINE	
9	2/28/2020	9:43	3RDFLOOR	Cartwright, Judy	Nurse Manager,Staff Nurse	Basic Meta Profile,CBC w Diff(2),Troponin-I ES	ROUTINE,STAT	
10	2/28/2020	11:30	3RDFLOOR	Abundy, Malcolm	Phlebotomist	CBC	ROUTINE	
11	2/28/2020	11:41	3RDFLOOR	Abundy, Malcolm	Phlebotomist	CBC	ROUTINE	
12	2/28/2020	11:49	3RDFLOOR	Cartwright, Judy	Nurse Manager,Staff Nurse	CBC w Diff	ROUTINE	
13	3/3/2020	9:35	3RDFLOOR	Cartwright, Judy	Nurse Manager,Staff Nurse	CBC w Diff,CBC(2)	ROUTINE,STAT	
14	3/3/2020	10:28	3RDFLOOR	Cartwright, Judy	Nurse Manager,Staff Nurse	CBC	ROUTINE	

Lab User Activity Report

The Lab User Activity report is a tabular report, generated in comma-separated text format (.CSV), which includes the date and time of the draw, collector/user, and nursing unit.

Each row in the report displays one collection episode where the patient was positively identified (via wristband scan), at least one specimen was collected with labels printed, and the collection was documented. Collections that are canceled or in which no specimens are collected are not included in the report.

This report can be opened in Microsoft Excel or other data manipulation tools for analysis and formatting as desired.

Parameters

You can specify the start and end date for the report.

Example of Lab User Activity Report

	A	B	C	D
1	Date	Time	User	Nursing Unit
2	2/11/2020	12:33	Bloodsoe, Drew	3RDFLOOR
3	2/14/2020	10:58	Bloodsoe, Drew	3RDFLOOR
4	2/14/2020	11:30	Bloodsoe, Drew	3RDFLOOR
5	2/19/2020	12:17	Bloodsoe, Drew	3RDFLOOR
6	2/19/2020	12:55	Cartwright, Judy	3RDFLOOR
7	2/19/2020	13:08	Bloodsoe, Drew	3RDFLOOR
8	2/24/2020	11:53	Drawright, Jonathan	3RDFLOOR
9	2/28/2020	9:43	Cartwright, Judy	3RDFLOOR
10	2/28/2020	11:30	Abundy, Malcolm	3RDFLOOR
11	2/28/2020	11:41	Abundy, Malcolm	3RDFLOOR
12	2/28/2020	11:49	Cartwright, Judy	3RDFLOOR
13	3/3/2020	9:35	Cartwright, Judy	3RDFLOOR
14	3/3/2020	10:28	Cartwright, Judy	3RDFLOOR

Missing Samples Report

For those hospitals that use the optional Receive Specimens workflow, the Missing Samples Report displays blood draws that were documented as collected in the PatientTouch System but have not been acknowledged as received in the lab.

Parameters

You can specify a range of dates and/or times to include in the Missing Samples Report.

Missing Samples Report ✕

Report: Missing Samples Report

Report Parameters

Start Date: 00:00 ▾

End Date: 00:00 ▾

Printer:

Example of Missing Samples Report

Missing Samples Report (01/01/20 - 03/05/20)					
Unit: 3RDFLOOR - (4 Patients)					
<hr/> <p>122 3 - Riley, Emma Medical Record Number: M11101 Visit Number: V11101 Date of Birth: 09/28/1965</p>					
<p>STAT - T0114 Ordered: 01/14/2020 09:19 Tests: CBC</p> <p>Tubes:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 60%;">Type</th> <th style="text-align: left;">Status</th> </tr> </thead> <tbody> <tr> <td>Blue (TR0114)</td> <td>Collected. By Bloodsoe, Drew at 02/14 10:58. Late Reason: CLARIFYING MD ORDER.</td> </tr> </tbody> </table>		Type	Status	Blue (TR0114)	Collected. By Bloodsoe, Drew at 02/14 10:58. Late Reason: CLARIFYING MD ORDER.
Type	Status				
Blue (TR0114)	Collected. By Bloodsoe, Drew at 02/14 10:58. Late Reason: CLARIFYING MD ORDER.				
<p>Routine - T0215 Ordered: 02/14/2020 11:27 Tests: CBC w Diff</p> <p>Tubes:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 60%;">Type</th> <th style="text-align: left;">Status</th> </tr> </thead> <tbody> <tr> <td>LAVENDER (TR0215)</td> <td>Collected. By Bloodsoe, Drew at 02/14 11:30.</td> </tr> </tbody> </table>		Type	Status	LAVENDER (TR0215)	Collected. By Bloodsoe, Drew at 02/14 11:30.
Type	Status				
LAVENDER (TR0215)	Collected. By Bloodsoe, Drew at 02/14 11:30.				
<p>Routine - T0219 Ordered: 02/19/2020 12:06 Tests: CBC</p> <p>Tubes:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 60%;">Type</th> <th style="text-align: left;">Status</th> </tr> </thead> <tbody> <tr> <td>LAVENDER (TR0219)</td> <td>Collected. By Cartwright, Judy at 02/19 12:55.</td> </tr> </tbody> </table>		Type	Status	LAVENDER (TR0219)	Collected. By Cartwright, Judy at 02/19 12:55.
Type	Status				
LAVENDER (TR0219)	Collected. By Cartwright, Judy at 02/19 12:55.				
<p>Routine - T0220 Ordered: 02/19/2020 12:14 Tests: CBC</p> <p>Tubes:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 60%;">Type</th> <th style="text-align: left;">Status</th> </tr> </thead> <tbody> <tr> <td>LAVENDER (TR0220)</td> <td>Collected. By Bloodsoe, Drew at 02/19 12:17.</td> </tr> </tbody> </table>		Type	Status	LAVENDER (TR0220)	Collected. By Bloodsoe, Drew at 02/19 12:17.
Type	Status				
LAVENDER (TR0220)	Collected. By Bloodsoe, Drew at 02/19 12:17.				

Blood Transfusion Reports

In addition to the Transfusion Record, the following reports are available for the Blood Product Administration module:

- [Transfusion Activity Report](#): Contains information about documented caregiver transfusion activity (results and alerts).
- [Blood Bank Activity Report](#): Contains information about blood product management activity (results and alerts) in the Blood Bank.
- [Transfusion Record Export Summary Report](#): The report includes the number of transfusion records exported as well as the number of records re-exported since the report was last run.

You can run these from the **Reports** menu in PatientTouch Clinical Manager.

Blood Transfusion Reports	
Transfusion Activity Report (CSV)	Transfusion Record By Nursing Unit
Blood Requisition Form	Blood Bank Activity Report (CSV)
Blood Requisition Form (By Blood Unit)	Transfusion Record Export Summary (CSV)
Transfusion Record By Patient	

Transfusion Activity Report

This report provides tabular data (CSV text format) on caregiver transfusion workflow activity, including user, patient, blood product, start and stop time, and procedure result (successful completion, alert, etc.), suitable for viewing and manipulation in Microsoft Excel and other data analysis tools.

This report is available in the Blood Transfusion section of the **Reports** menu in the PatientTouch Clinical Manager.

You can run the report by user (caregiver), nursing unit, and/or patient for a specified date range. Select Blood Bank Activity Report (CSV) from the Reports screen. Enter values to control the data included in the report.

Transfusion Activity Report (CSV) ✕

Report: Transfusion Activity Report (CSV)

Report Parameters

Nurse:

Patient:

Nursing Unit:

Start Date:

End Date:

Printer:

Example of the Transfusion Activity Report

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Transfusion Activity Report (CSV)		Date selected	02/01/2020 00:00 to 03/05/2020 23:59									
2													
3	Activity ID	Caregiver	Nursing Unit	Location	Patient Name	DOB	Gender	MRN	Visit #	Activity	Result	Date	Time
4	20256	Cartwright, Judy, RN	3RDFLOOR	122 3	Riley, Emma	9/28/1965 0:00	F	M11101	V11101	Start Transfusion	Canceled by User - Patie	2/14/2020	11:38
5	20257	Cartwright, Judy, RN	3RDFLOOR	122 3	Riley, Emma	9/28/1965 0:00	F	M11101	V11101	Start Transfusion	Canceled by User	2/14/2020	11:41
6	20258	Cartwright, Judy, RN	3RDFLOOR	122 3	Riley, Emma	9/28/1965 0:00	F	M11101	V11101	Start Transfusion	Documented by User	2/14/2020	11:44
7	20259	Cartwright, Judy, RN	3RDFLOOR	122 3	Riley, Emma	9/28/1965 0:00	F	M11101	V11101	End Transfusion	Documented by User - f	2/14/2020	11:46
8	20260	Cartwright, Judy, RN	3RDFLOOR	122 3	Riley, Emma	9/28/1965 0:00	F	M11101	V11101	Start Transfusion	Documented by User	2/19/2020	12:28
9	20261	Cartwright, Judy, RN	3RDFLOOR	122 3	Riley, Emma	9/28/1965 0:00	F	M11101	V11101	End Transfusion	Canceled by User	2/19/2020	12:30
10	20262	Cartwright, Judy, RN	3RDFLOOR	122 3	Riley, Emma	9/28/1965 0:00	F	M11101	V11101	End Transfusion - Documented by User		2/19/2020	12:32
11	20263	Cree, Kym, Best Nurs	3RDFLOOR	120 1	Smith, Frank	9/28/1956 0:00	M	M1001	V1001	Start Transfusion	Documented by User	2/19/2020	13:15
12	20264	Cree, Kym, Best Nurs	3RDFLOOR	1191 1	Genesee, Lili	9/28/1956 0:00	U	2.02E+10	119001	Start Transfusion	Documented by User	2/19/2020	13:45
13	20265	Cree, Kym, Best Nurs	3RDFLOOR	1191 1	Genesee, Lili	9/28/1956 0:00	U	2.02E+10	119001	End Transfusion	Documented by User - f	2/19/2020	13:58
14	20266	Cartwright, Judy, RN	3RDFLOOR	120 1	Smith, Frank	9/28/1956 0:00	M	M1001	V1001	End Transfusion	Canceled by User	2/19/2020	14:02
15	20267	Cartwright, Judy, RN	3RDFLOOR	120 1	Smith, Frank	9/28/1956 0:00	M	M1001	V1001	End Transfusion	Documented by User - f	2/19/2020	14:02
16	20268	Cree, Kym, Best Nurs	3RDFLOOR	1191 1	Genesee, Lili	9/28/1956 0:00	U	2.02E+10	119001	Start Transfusion	Documented by User	2/19/2020	14:13

As with other PatientTouch System reports, the Transfusion Activity report can be scheduled and automatically generated to a specified destination.

Blood Bank Activity Report

This report provides tabular data (CSV text format) on blood bank workflow activity, including information about the user, blood product, patient, and activity result (successful completion, alert, manual unassignment with reason, etc.), suitable for viewing and manipulation in Microsoft Excel and other data analysis tools. This report is available in the Blood Transfusion section of the **Reports** menu in the PatientTouch Clinical Manager.

You can run the report by user (caregiver), nursing unit, and/or patient for a specified date range. Select Blood Bank Activity Report (CSV) from the Reports screen. Enter values to control the data included in the report.

Blood Bank Activity Report (CSV) ✕

Report: Blood Bank Activity Report (CSV)

Report Parameters

Nurse: Select

Patient: Select

Nursing Unit: Select

Start Date: Select

End Date: Select

Printer: Select

View Report
Print Report
Cancel

Example of the Blood Bank Activity Report

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	Blood Bank Activity Report (CSV)		Date select 02/01/2020 00:00 to 03/05/2020 23:59												
2															
3	Activity ID	User	Activity	Blood Product	ABO/Rh Type	Blood Unit Expiration	Updated E Result	Patient	Blood Band ID	Nursing Ur Caregiver	Date	Time			
4		2 Banks, Bernie	Assign	PLATELETS	O Rh Positive	1234002 12/31/2020	Documented by User	Riley, Emma	BAR-1002	3RD FLOOR	2/11/2020	11:15			
5		3 Banks, Bernie	Assign	PLATELETS	O Rh Positive	1234002 12/31/2020	Canceled by User	Riley, Emma	BAR-1002	3RD FLOOR	2/11/2020	11:42			
6		2 Banks, Bernie	Release	PLATELETS	O Rh Positive	1234002 12/31/2020	Auto-documented by Sy	Riley, Emma	BAR-1002	3RD FLOOR	2/11/2020	11:42			
7		3 System	Release	PLATELETS	O Rh Positive	1234002 12/31/2020	Canceled by User	Riley, Emma	BAR-1002	3RD FLOOR	2/11/2020	11:42			
8		4 Banks, Bernie	Assign	PLATELETS	O Rh Positive	1234002 12/31/2020	Documented by User	Riley, Emma	BAR-1002	3RD FLOOR	2/11/2020	12:03			
9		4 Banks, Bernie	Release	PLATELETS	O Rh Positive	1234002 12/31/2020	Documented by User	Riley, Emma	BAR-1002	3RD FLOOR	2/11/2020	12:17			
10		5 Banks, Bernie	Assign	CPD WHOLE BLOOD	O Rh Negative	211001 12/31/2020	Documented by User	Smith, Frank		3RD FLOOR	2/11/2020	12:41			
11		6 Banks, Bernie	Assign	PLATELETS	O Rh Positive	1234002 12/31/2020	Documented by User	Riley, Emma	BAR-1002	3RD FLOOR	2/14/2020	11:02			
12		6 Cartwright, Judy	Release	PLATELETS	O Rh Positive	1234002 12/31/2020	Auto-documented by Sy	Riley, Emma	BAR-1002	3RD FLOOR	2/14/2020	11:47			
13		7 Banks, Bernie	Assign	PLATELETS	O Rh Positive	5566778 12/1/2020	Documented by User	Riley, Emma	BAR-1002	3RD FLOOR	2/19/2020	12:23			
14		7 Cartwright, Judy	Release	PLATELETS	O Rh Positive	5566778 12/1/2020	Auto-documented by Sy	Riley, Emma	BAR-1002	3RD FLOOR	2/19/2020	12:33			
15		8 Banks, Bernie	Assign	CBC	O Rh Negative	1234002 12/31/2020	Documented by User	Smith, Frank		3RD FLOOR	2/19/2020	13:10			
16		9 Banks, Bernie	Assign	PLATELETS	O Rh Negative	219001 2/14/2021	Documented by User	Genesee, Lili		3RD FLOOR	2/19/2020	13:38			
17		9 Cree, Kym	Release	PLATELETS	O Rh Negative	219001 2/14/2021	Auto-documented by Sy	Genesee, Lili		3RD FLOOR	2/19/2020	13:59			
18		8 Cartwright, Judy	Release	CBC	O Rh Negative	1234002 12/31/2020	Auto-documented by Sy	Smith, Frank		3RD FLOOR	2/19/2020	14:02			
19		10 Banks, Bernie	Assign	CPD WHOLE BLOOD	O Rh Negative	219001 2/14/2021	Documented by User	Genesee, Lili		3RD FLOOR	2/19/2020	14:08			
20		11 Banks, Bernie	Assign	CBC	O Rh Positive	303202 12/31/2020	Documented by User	Caan, Scott		3RD FLOOR	3/3/2020	10:33			
21		11 User, Admin	Manually	CBC	O Rh Positive	303202 12/31/2020	Documented by User	Caan, Scott		3RD FLOOR	3/3/2020	10:38			
22															
23		1 Banks, Bernie	Check Out	PLATELETS	O Rh Positive	1234002 12/31/2020	Documented by User	Riley, Emma		3RD FLOOR	Cartwright	2/11/2020	12:07		
24		1 Banks, Bernie	Return	PLATELETS	O Rh Positive	1234002 12/31/2020	Documented by User	Riley, Emma		3RD FLOOR	2/11/2020	12:16			
25		2 Banks, Bernie	Check Out	PLATELETS	O Rh Positive	1234002 12/31/2020	Documented by User	Riley, Emma		3RD FLOOR	Cartwright	2/14/2020	11:22		
26		3 Banks, Bernie	Check Out	CPD WHOLE BLOOD	O Rh Negative	219001 2/14/2021	Documented by User	Genesee, Lili		3RD FLOOR	Cree, Kym	2/19/2020	14:09		

As with other PatientTouch reports, the Blood Bank Activity report can be scheduled and automatically generated to a specified destination.

Transfusion Record Export Summary Report

If the PatientTouch Clinical Manager is configured to export blood transfusion records, the report includes the number of transfusion records exported as well as the number of records re-exported since the report was last run. The patient's medical record number, visit number, and the date and time the transfusion record was edited in the Clinical Manager are included in the report for patients whose transfusion records have been re-exported.

This report is available in the Blood Transfusion section of the **Reports** menu in the PatientTouch Clinical Manager. You can choose to view the report on screen or print the report.

Transfusion Record Export Summary (CSV) ✕

Report: Transfusion Record Export Summary (CSV)

Report Parameters _____

Printer: Select

View Report
Print Report
Cancel

Example of the Transfusion Record Export Summary Report

A	B	C	D	E	F	G	H	I	J	K	L	M
Transfusion Activity R Date select 06/04/2013 00:00 to 06/04/2013 23:59												
Activity ID	Caregiver	Nursing Un	Location	Patient Name	DOB	Gender	MRN	Visit #	Activity	Result	Date	Time
33	Noble, Rox	3RD FLOOR	333 1	Neill, Rachel	1/27/1961 0:00		M1111118	V00000066	Start Transfusion	Canceled by User - Patient-Blood Mismatch Alert	6/4/2013	14:01
34	Noble, Rox	3RD FLOOR	333 1	Neill, Rachel	1/27/1961 0:00		M1111118	V00000066	Start Transfusion	Canceled by User	6/4/2013	14:02
35	Noble, Rox	3RD FLOOR	333 1	Neill, Rachel	1/27/1961 0:00		M1111118	V00000066	Start Transfusion	Canceled by User	6/4/2013	14:06
36	Noble, Rox	3RD FLOOR	333 1	Neill, Rachel	1/27/1961 0:00		M1111118	V00000066	Start Transfusion	Canceled by User	6/4/2013	14:06
37	Noble, Rox	3RD FLOOR	333 1	Neill, Rachel	1/27/1961 0:00		M1111118	V00000066	Start Transfusion	Canceled by User - Blood Band ID mismatch	6/4/2013	14:09

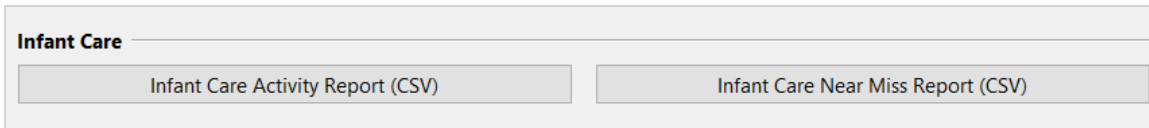
As with other PatientTouch reports, the Transfusion Activity Report can be scheduled and automatically sent to a specified destination.

Infant Care Reports

The following reports are available for the Infant Care module:

- Infant Care Activity Report: Contains information about infant care and breast milk management activity (results and alerts).
- Infant Care Near Miss Report: Contains information about “near misses” (alerts for scans of incorrect bottles for feeding, infant matching, etc.) documented during infant care activities.

You can run these from the Reports menu in PatientTouch Clinical Manager.



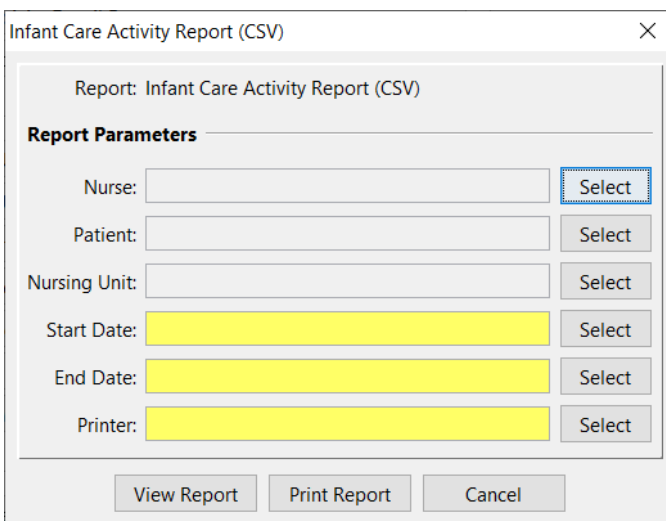
Activity Report

The Infant Care Activity Report is a tabular report (CSV text format) containing information about infant care workflow activity, and includes information about the user, infant, breast milk, and activity result (successful completion, alert, etc.) suitable for viewing and manipulation in Microsoft Excel and other data analysis tools.

When there is a mismatch between mother and infant or when an incorrect bottle is scanned, a mismatch alert displays on the handheld. The Infant Care Activity Report displays the handheld ID of the nurse who received the mismatch alert. In addition, the report displays the barcode that was scanned. See the example report below for additional details.

This report is available in the Infant Care section of the Reports menu in the PatientTouch System Manager.

You can run the report by nurse, patient, and/or nursing unit for a specified date range.



Example Infant Care Activity Report

	A	B	C	D	E	F	G	H	I	J	K	L	M	N
1	Infant Care Activity Report (CSV)		Date selec 02/01/2020 00:00 to 03/05/2020 23:59											
2														
3	Activity ID	Caregiver	Nursing Ur	Patient	DOB	Gender	Pt MRN	Visit Num	Handheld I	Activity	Result	Barcode S	Date	Time
4		20270 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Verify Infant Match	Canceled by User		2/26/2020	13:21
5		20271 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Verify Crib Match	Canceled by User		2/26/2020	13:22
6		20272 Cartwright, Judy, RN	4 WEST	Britt, Betty	4/4/1984	F	M100035	V100035	HH_826CF	Breast Milk Inpatient	Canceled by User		2/28/2020	10:01
7		20273 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Print Labels for Hom	Canceled by User		2/28/2020	10:04
8		20274 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Receive Bottles	Canceled by User		2/28/2020	10:15
9		20275 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Print Bin Label	Canceled by User		2/28/2020	10:18
10		20276 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Bottle-Bin Match	Canceled by User		2/28/2020	10:24
11		20277 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Infant Feeding	Canceled by User		2/28/2020	10:26
12		20278 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Infant Feeding	Documented by User		2/28/2020	10:27
13		20280 Cartwright, Judy, RN	4 WEST	Britt, Baby	6/13/2019	M	M100036	V100036	HH_826CF	Reprint Bottle Label	Canceled by User		2/28/2020	10:39

As with other PatientTouch reports, the Infant Care Activity Report can be scheduled and automatically emailed.

Near Miss Report

The Infant Care Near Miss Report is a tabular report (CSV text format) containing information about infant care workflow activities that resulted in “near misses”—events for which an incorrect match occurred, such as a mismatch between infant and bottle during feeding, or between an infant and mother – during the workflow. The report includes information about the user, infant, attempted match activity, suitable for viewing and manipulation in Microsoft Excel and other data analysis tools.

When there is a mismatch between mother and infant or when an incorrect bottle is scanned, a mismatch alert displays on the handheld. The Infant Care Near Miss Report displays the handheld ID of the nurse who received the mismatch alert. In addition, the report displays the barcode that was scanned. See the example report below for additional details.

This report is available in the Infant Care section of the Reports menu in the PatientTouch System Manager.

You can run the report by nurse, patient, and/or nursing unit for a specified date range.

Infant Care Near Miss Report (CSV) ✕

Report: Infant Care Near Miss Report (CSV)

Report Parameters

Nurse: Select

Patient: Select

Nursing Unit: Select

Start Date: Select

End Date: Select

Printer: Select

View Report
Print Report
Cancel

Example Near Miss Report

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	
1	Infant Care Near Miss Date select: 11/03/2014 00:00 to 12/23/2014 23:59																
2																	
3	Activity ID	Caregiver	Nursing U	Location	Patient	DOB	Gender	MRN	Visit#	Handheld Activity	Near Miss	Barcode S	Second At Date	Time			
4	252	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	HH_EBCCS Infant Feed Breast Milk Bot	V100091	Cancelled	11/5/2014	5:29			
5	243	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	HH_EBCCS Infant Feed No Mother Link	V100091	Cancelled	11/4/2014	12:56			
6	246	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	HH_EBCCS Infant Feed No Mother Link	V100091	Cancelled	11/4/2014	12:57			
7	254	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	HH_EBCCS Infant Feed No Mother Link	V100091	Cancelled	11/5/2014	5:30			
8	257	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	HH_EBCCS Infant Feed No Mother Link	V100091	Cancelled	11/5/2014	5:32			
9	276	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	HH_EBCCS Infant Feed No Mother Link	V100091	Cancelled	11/5/2014	6:12			
10	279	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	Infant Feed No Mother Link	V100091	Cancelled	11/5/2014	6:14			
11	282	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	Infant Feed No Mother Link	V100091	Cancelled	11/5/2014	6:16			
12	288	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	Infant Feed No Mother Link	V100091	Cancelled	11/5/2014	6:21			
13	292	User, Adm	Pediatrics	403	Brady, Rol	8/22/2000	M	M100091	V100091	Infant Feed No Mother Link	V100091	Cancelled	11/5/2014	6:24			
14	360	User, Adm	Pediatrics	401	Evans, Peri	1/14/2006	F	M100090	V100090	Infant Feed No Mother Link	V100090	Cancelled	#####	6:39			
15	365	Benner, S	Nursery	200	5	Wolf, Peti	12/9/2014	M	M650	V650	Infant Feed No Mother Link	V650	Cancelled	#####	9:46		
16	368	Benner, S	Nursery	200	5	Wolf, Peti	12/9/2014	M	M650	V650	Infant Feed No Mother Link	V650	Cancelled	#####	9:48		
17	372	User, Adm	Nursery	200	5	Wolf, Peti	12/9/2014	M	M650	V650	Infant Feed No Mother Link	V650	Cancelled	#####	16:30		
18	342	User, Adm	Nursery	200	5	Britt, Baby	8/9/2013	F	M100033	V100033	Reprint Bot! Reprint Bottle I	V100033	Cancelled	#####	15:15		
19	343	User, Adm	Nursery	200	5	Britt, Baby	8/9/2013	F	M100033	V100033	Reprint Bot! Reprint Bottle I	V100033	Cancelled	#####	15:16		
20	344	User, Adm	Nursery	200	5	Britt, Baby	8/9/2013	F	M100033	V100033	Reprint Bot! Reprint Bottle I	V100033	Cancelled	#####	15:16		
21	346	User, Adm	Nursery	200	5	Britt, Baby	8/9/2013	F	M100033	V100033	Reprint Bot! Reprint Bottle I	V100033	Cancelled	#####	15:20		
22	347	User, Adm	Nursery	200	5	Britt, Baby	8/9/2013	F	M100033	V100033	Reprint Bot! Reprint Bottle I	V100033	Cancelled	#####	15:21		
23	349	User, Adm	Nursery	200	5	Britt, Baby	8/9/2013	F	M100033	V100033	Reprint Bot! Reprint Bottle I	V100033	Cancelled	#####	15:23		

As with other PatientTouch reports, the Infant Care Near Miss Report can be scheduled and automatically emailed.

Communications Reports

Users with the Manage Reports privilege can view and generate Communications Reports in Clinical Manager.

The following reports are available for the Communications module:

- HIPAA Audit for Messaging Report
- HIPAA Audit for Tagged Messaging Report

Communications

HIPAA Audit for Messaging Report

HIPAA Audit for Tagged Messaging Report

HIPAA Audit for Messaging Report

This report lists all sent and received messages by User. You can run the report by user for a specified date range.

HIPAA Audit for Messaging Report ✕

Report: HIPAA Audit for Messaging Report

Report Parameters

User: Select

Start Date: Select

End Date: Select

Printer: Select

View Report
Print Report
Cancel

Example HIPAA Audit for Messaging Report

#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R		
1	HIPAA Audit for Messaging Report																			
2	Report Date:	10/22/2014 13:44																		
3	Date Range:	01/01/14 to 10/22/14																		
4	User:	M. Smart (msmart)																		
5																				
6	Message ID	Thread ID	Sender Nu	Sender ID	Date Sent	Time Sent	Type	Priority	Subject	Message	Patient	Visit#	Attachme	Media	Recipient	Recipient	Date	Reac	Time	Read
7	91402808-41A7-44F8-A1C183C6-07F9-4FE7-9662-A30328F1A8D6		M. Smart	msmart@	9/24/2014	8:04	chat	MEDIUM	I need a witness in room #223						M. Smart	msmart@pss.dev				
8	02104128-433a-4215-88 60000dd-3706-423f-8add-cdec9c29bb04		Nancy Cer	ncena@pr	9/24/2014	8:05	chat	MEDIUM	Patient ex Bradford, V100092				https://17	image	M. Smart	msmart@pss.dev				
9	9311ED871-0310-4083-8490-81C85A791483		Roxy Nob	rn@pss.dv	9/24/2014	8:06	groupchat	LOW	Staff Mee	Please meet in CCU Conference Room					Jonathan j	drawnigh@pss.dev				
10																				
11																				
12																				
13																				
14																				
15	09A78764-0812-484E-8788DF3DDF-43CA-41E9-94CD-8AE950048CA		M. Smart	msmart@	9/24/2014	8:08	chat	MEDIUM	Update or Lockhart, V100093						Greg Phar	gpharma@pss.dev				
16	50102af7b-1266-4a62-9f 60000dd-3706-423f-8add-cdec9c29bb04		Nancy Cer	ncena@pr	9/28/2014	7:10	chat	MEDIUM	C/O iv pai	Lockhart, V100093			https://17	image	M. Smart	msmart@pss.dev				
17	A8304680-7E19-40A7-836F-2D69884D6664		Unice Halj	uhalper@	9/28/2014	7:17	groupchat	MEDIUM	Family rec	Help getti Lockhart, V100093					M. Smart	msmart@pss.dev				
18	77815F5F-048A-4E26-87A1-88533E652602		Nancy Cer	ncena@pr	9/28/2014	7:20	groupchat	MEDIUM	Family rec	On my wa Lockhart, V100093					Nancy Cer	ncena@pss.dev				7:20
19																				
20																				
21	65949833-4912-4622-AC F120C082-8854-4758-905A-86057A1CA18		Grace Hua	ghua@psl	9/28/2014	8:05	chat	HIGH	Dr. Carter	will be on unit to round in 5 minutes					M. Smart	msmart@pss.dev				
22	1296e302-468f-448e-be 39b089a7-7eee-4c95-811e-796ebdabc8d5		Nancy Cer	ncena@pr	9/28/2014	8:10	groupchat	MEDIUM	C/O iv Sit	Please see Benes, Eli V100097			https://17	image	Drew Bloc	db@pss.d				8:11
23																				
24	6E338D4C-3F72-4239-8F7B-C6525394F5CE		Drew Bloc	db@pss.d	9/28/2014	8:11	groupchat	LOW	C/O iv Sit	Acknowledge Benes, Eli V100097					M. Smart	msmart@pss.dev				
25																				
26	6E498536-7189-4826-88 866081CA-9A33-4D86-90AA-D4814F4389D		M. Smart	msmart@	10/6/2014	13:05	chat	MEDIUM	Pain 7	Evans, Jan V100095					Judy Carv	jcarterw@pss.dev				
27	190990A1-011F-4882-4E 980AA751-2D09-4298-878B-02AE6F748664		M. Smart	msmart@	10/6/2014	13:07	chat	MEDIUM	Hello	Bradford, V100092					Kerry Wei	kweaver@				13:08
28	7V9H9-11	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:08	chat	MEDIUM	yes?	Bradford, V100092					M. Smart	msmart@				13:08
29	74E582D0-3038-45C9-9198AA751-2D09-4298-878B-02AE6F748664		M. Smart	msmart@	10/6/2014	13:08	chat	MEDIUM	Nice	Bradford, V100092					Kerry Wei	kweaver@				13:08
30	7V9H9-16	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:08	chat	MEDIUM	good	Bradford, V100092					M. Smart	msmart@				13:08
31	6e0744c3-e48a-4241-bf msmart@pss.dev		Kerry Wei	kweaver@	10/6/2014	13:08	chat	MEDIUM		Bradford, V100092			https://17	audio	M. Smart	msmart@				13:08
32	45695284-7671-4477-ba msmart@pss.dev		Kerry Wei	kweaver@	10/6/2014	13:09	chat	HIGH		Bradford, V100092			https://17	image	M. Smart	msmart@				13:09
33	7V9H9-99	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:09	chat	HIGH	I need a	Bradford, V100092					M. Smart	msmart@				13:09

HIPAA Audit for Tagged Messaging Report

This report lists all sent and received messages by tagged patient. You can run the report for a patient with a specified date range.

HIPAA Audit for Tagged Messaging Report ✕

Report: HIPAA Audit for Tagged Messaging Report

Report Parameters

Patient:

Start Date:

End Date:

Printer:

Example HIPAA Audit for Tagged Messaging Report

#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	
1	HIPAA Audit for Tagged Messaging Report																
2	Report Date:		10/22/2014 13:55														
3	Date Range:		10/01/14 to 10/22/14														
4	Patient:		Bradford, Tom (MRN: M100092, Visit No: V100092)														
5																	
6	Message ID	Thread ID	Sender No	Sender ID	Date Sent	Time Sent	Type	Priority	Subject	Message	Attachme	Media	Recipient	Recipient	Date	Time	Read
7	13009511-011f-4882-82ef-2c80ff23e309	980AA751-2069-4298-8788-02AE6f748664	M. Smart	msmart@	10/6/2014	13:07	chat	MEDIUM		hello			Kerry Wei	kweaver@	13:08		
8	7v6H9-11	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:08	chat	MEDIUM		yes?			M. Smart	msmart@	13:08		
9	F4E38020-3038-45C9-9331-E78C2F6C962	980AA751-2069-4298-8788-02AE6f748664	M. Smart	msmart@	10/6/2014	13:08	chat	MEDIUM		Nice			Kerry Wei	kweaver@	13:08		
10	7v6H9-16	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:08	chat	MEDIUM		good			M. Smart	msmart@	13:08		
11	6e0744d1-e48a-4341-891f-d779291705a6	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:08	chat	MEDIUM		https://17	audio		M. Smart	msmart@	13:08		
12	a5695284-76f1-4477-ba42-c58755b2d1d5	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:09	chat	HIGH		https://17	image		M. Smart	msmart@	13:09		
13	7v6H9-99	msmart@pss.dev	Kerry Wei	kweaver@	10/6/2014	13:09	chat	HIGH		I need a witness in room #			M. Smart	msmart@	13:09		